

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 3  
 FOR SE OF FORM 24/48

|   |  |  |  |
|---|--|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                      |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020  |  |
| Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report |  | <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |

|  |                    |                              |   |  |  |
|--|--------------------|------------------------------|---|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                          |                    |                              | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 09 / 2014</b>  |  |  |
| Mailing Address <b>400 N Capitol St., NW<br/>Suite 735</b>               |                    |                              | Amount<br><b>384.74</b>   |  |  |
| City<br><b>Washington</b>  | State<br><b>DC</b> | Zip Code<br><b>20001</b>     | Transaction ID : <b>SE.27230</b>  |  |  |
| Purpose of Expenditure<br><b>IE-McDaniel-Email/Social Media/Printing</b> |                    | Category/<br>Type <b>004</b> | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 09 / 2014</b>   |  |  |
| Name of Federal Candidate<br><b>CHRISTOPHER BRIAN MCDANIEL</b>           |                    |                              | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose  |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <b>257958.13</b> |                    |                              | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MS</b> |  |  |
|  |                    |                              | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |  |  |

|  |                    |                              |   |  |  |
|--|--------------------|------------------------------|---|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                          |                    |                              | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 12 / 2014</b>  |  |  |
| Mailing Address <b>400 N Capitol St., NW<br/>Suite 735</b>               |                    |                              | Amount<br><b>211.52</b>   |  |  |
| City<br><b>Washington</b>  | State<br><b>DC</b> | Zip Code<br><b>20001</b>     | Transaction ID : <b>SE.27231</b>  |  |  |
| Purpose of Expenditure<br><b>IE-McDaniel-Email/Social Media/Printing</b> |                    | Category/<br>Type <b>004</b> | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 12 / 2014</b>   |  |  |
| Name of Federal Candidate<br><b>CHRISTOPHER BRIAN MCDANIEL</b>           |                    |                              | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose  |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <b>258169.65</b> |                    |                              | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MS</b> |  |  |
|  |                    |                              | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |  |  |

|   |               |
|---|---------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶    | <b>596.26</b> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶ |               |
| (c) TOTAL Independent Expenditures..... ▶                   |               |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*R. Russ Walker*
*[Electronically Filed]*

Date

 MM / DD / YYYY  
**05 / 14 / 2014**

Signature

FEC Schedule E (Form 24/28) Rev. 09/2013

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

|                      |   |    |   |
|----------------------|---|----|---|
| PAGE                 | 3 | OF | 3 |
| FOR SE OF FORM 24/48 |   |    |   |

|   |  |  |  |
|---|--|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                      |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020  |  |
| Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report |  | <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |

|   |                    |   |   |
|---|--------------------|---|---|
| Full Name of Payee<br><b>News Distribution Network</b>                      |                    | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 09 / 2014</b>  |   |
| Mailing Address 3280 Peachtree Rd. NE<br>Suite 2000                         |                    | Amount<br><b>4645.00</b>  |   |
| City<br><b>Atlanta</b>  | State<br><b>GA</b> | Zip Code<br><b>30305</b>  | Transaction ID : <b>SE.27229</b>  |
| Purpose of Expenditure<br>IE-Cochran-Online Ads                             |                    | Category/<br>Type <b>004</b>  | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 09 / 2014</b>   |
| Name of Federal Candidate<br><b>THAD COCHRAN</b>                            |                    | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose  | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MS</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>257573.39</b> |                    | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |   |

|   |       |   |  |
|---|-------|---|--|
| Full Name of Payee                                      |       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY   |  |
| Mailing Address   |       | Amount  |  |
| City  | State | Zip Code  | Date of Disbursement or Obligation<br>MM / DD / YYYY   |
| Purpose of Expenditure                                  |       | Category/<br>Type   |  |
| Name of Federal Candidate                               |       | <input type="checkbox"/> Support<br><input type="checkbox"/> Oppose   | Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date<br>Per Election for Office Sought |       | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ |  |

|   |                 |
|---|-----------------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶   | <b>4645.00</b>  |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... |                 |
| (c) TOTAL Independent Expenditures.....▶                  | <b>10137.81</b> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*R. Russ Walker*

Signature

[Electronically Filed]

Date

MM / DD / YYYY  
**05 / 14 / 2014**